

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1						51		
2	1						52		
3		1					53		
4		1					54		
5		3					55		
6		3					56		
7		3					57		
8		3					58		
9		3					59		
10		3					60		
11	1						61		
12	1						62		
13		1					63		
14		1					64		
15		3					65		
16		3					66		
17		3					67		
18		3					68		
19		3					69		
20		3					70		
21	1						71		
22		1					72		
23		1					73		
24	1						74		
25	1	(1)					75		
26							76		
27	1						77		
28	1						78		
29	1						79		
30	1						80		
31	1						81		
32	1						82		
33	1						83		
34	1						84		
35		4					85		
36		2					86		
37		2					87		
38		8					88		
39		8					89		
40	1						90		
41	1						91		
42	1						92		
43	1						93		
44		4					94		
45		2					95		
46		(1)					96		
47	1						97		
48	1						98		
49		2					99		
50	1						100		
TOTAL IND.	22						TOTAL IND.		
TOTAL DEP.	76						TOTAL DEP.		
TOTAL CLAIMS	98						TOTAL CLAIMS		